

Substitute for form 1449A/PTO				<i>Complete if Known</i> 01041567979	
INFORMATION DISCLOSURE STATEMENT BY APPLICANT					
(Use as many sheets as necessary)					
Sheet	1	of	1	Examiner Name	
				Attorney Docket Number	78104100-N17926

U.S. PATENT DOCUMENTS

Exam. Initials	Cite No.	U.S. Patent Document		Name of Patentee or Applicant	Publication Date (MM-YYYY)
		Number	Kind Code (if known)		
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FOREIGN PATENT DOCUMENTS

Exam. Initials	Cite No.	Foreign Patent Document			Name of Patentee or Applicant	Publication Date (MM-YYYY)	Trans.
		Office	Number	Kind Code (if known)			
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		WO	02/055122	A	BIOCOMPATIBLES, LTD.	07-2002	
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Examiner Signature	/Caralynne Helm/	Date Considered	10/20/2008
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ALL REFERENCES CONSIDERED EXCEPT WHERE LINED THROUGH. /C.H./